

Attorney Docket No.

BIRCH, STEWART, KOLASCH & BIRCH, LLP 38

3813-0101P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone. (703) 205-8000 • Facsinule: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

Insert Title:	FOR USE IN IMMUNE THERAPY							
Fill in Appropriate Information - For Use Without Specification Attached:	the specification v United States App and amended on the specification v International App	was filed on plication Numbe was filed on plication Numbe	ereto. If not attached here June 21, 2001 > er October 23, 200 r PCT/JP00/0	0 / 7385 /		(if applicable	; e) and/or _ as PCT and was	
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37. Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:							
Insert Priority Information: (if appropriate)	Prior Foreign Application(s)				Priority Claimed			
	11/300122		<u>/</u>	October 21, 1	999 /	\boxtimes		
	(Number)	(Country)		(Month/Day/Ye	ear Filed)	Yes	No	
	(Number)	(Country)		(Month/Day/Ye	ear Filed)	Yes	No	
	(Number)	(Country)		(Month/Day/Ye	ear Filed)	\rightarrow \text{res}	□ No	
	(Number)	(Country)		(Month/Day/Ye	ear Filed)	\rangle res	□ No	
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.							
Insert Provisional Application(s): (if any)	(Application Number)			(Filing Date)				
	(Application Number)			(Filing Date)				
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country		Application Number	Da	ate of Filing (Month	/Day/Year)		
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
Insert Prior U.S Application(s): (if any)	(Application Number)	(Application Number) (Filing		(Status - pate		nted, pending, abandoned)		
Page 1 of 2 (Rev. 01 '22, 01)	(Application Number)		(Filing Date)	(St	tatus - patented, pe	ndung, abandor	ned)	



I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart Joseph A. Kolasch Bernard L. Sweeney Charles Gorenstein Leonard R. Svensson Andrew D. Meikle Joe McKinney Muncy John W. Bailey Gary D. Yacura Mark J. Nuell	(Feg. No. 21,060) (Feg. No. 22,463) (Feg. No. 24,448) (Feg. No. 30,330) (Feg. No. 32,868) (Feg. No. 32,334) (Reg. No. 32,881) (Feg. No. 35,416) (Reg. No. 36,623)	Terrell C. Birch James M. Slattery Michael K. Mutter Gerald M. Murphy, Jr. Terry L. Clark Marc S. Weiner Donald J. Daley John A. Castellano Thomas S. Auchterlonie	(Reg. No. 19.382) (Feg. No. 28,380) (Reg. No. 29,680) (Reg. No. 32,644) (Reg. No. 32,644) (Reg. No. 32,181) (Feg. No. 34,313) (Feg. No. 35,094) (Feg. No. 37,275
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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor Insert Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inverted This Dix marent is Signated	Keisuke TESHIGAWARA) wishe Test par	-204	June 26 , 2001			
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!	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth Insentor, if any see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
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*DATE OF SIGNATURE